

EXHIBIT 1

ALABAMA SJIS CASE DETAIL

PREPARED FOR: LINDA HAWKINS



County: **31** Case Number: **CV-2017-900195.00** Court Action:
 Style: **DAVID SUMNERS V. METROPOLITAN LIFE INSURANCE COMPANY**

Real Time

Case

Case Information

County:	31-ETOWAH	Case Number:	CV-2017-900195.00	Judge:	DAK:DAVID A KIMBERLEY
Style:	DAVID SUMNERS V. METROPOLITAN LIFE INSURANCE COMPANY				
Filed:	03/08/2017	Case Status:	ACTIVE	Case Type:	CONTRACT/EJMNT/SEIZU
Trial Type:	BENCH	Track:		Appellate Case:	0
No of Plaintiffs:	1	No of Defendants:	1		

Damages

Damage Amt:	0.00	Punitive Damages:	0.00	General Damages:	0.00
No Damages:		Compensatory Damages:	0.00		
Pay To:		Payment Frequency:		Cost Paid By:	

Court Action

Court Action Code:		Court Action Desc:		Court Action Date:	
Num of Trial days:	0	Num of Liens:	0	Judgment For:	
Disposition Date of Appeal:		Disposition Judge:	:	Disposition Type:	
Revised Judgement Date:		Minstral:		Appeal Date:	
Date Trial Began but No Verdict (TBNV1):					
Date Trial Began but No Verdict (TBNV2):					

Comments

Comment 1:
 Comment 2:

Appeal Information

Appeal Date:		Appeal Case Number:		Appeal Court:	
Appeal Status:		Origin Of Appeal:			
Appeal To:		Appeal To Desc:		LowerCourt Appeal Date:	
Disposition Date Of Appeal:		Disposition Type Of Appeal:			

Administrative Information

Transfer to Admin Doc Date:		Transfer Reason:		Transfer Desc:	
Number of Subpoenas:		Last Update:	03/08/2017	Updated By:	AJA

Parties

Party 1 - Plaintiff INDIVIDUAL - SUMNERS DAVID

Party Information

Party:	C001-Plaintiff	Name:	SUMNERS DAVID	Type:	I-INDIVIDUAL
Index:	D METROPOLITAN	Alt Name:		Hardship:	No
Address 1:	330 TANT MUCH DAM ROAD			JID:	DAK
				Phone:	(256) 000-0000

Address 2:

City: ALBERTVILLE State: AL Zip: 35950-0000 Country: US
 SSN: XXX-XX-X999 DOB: Sex: Race:

Court Action

Court Action: Court Action Date:
 Amount of Judgement: \$0.00 Court Action For: Exemptions:
 Cost Against Party: \$0.00 Other Cost: \$0.00 Date Satisfied:
 Comment: Arrest Date:
 Warrant Action Date: Warrant Action Status: Status Description:

Service Information

Issued: Issued Type: Reissue: Reissue Type:
 Return: Return Type: Return: Return Type:
 Served: Service Type Service On: Served By:
 Answer: Answer Type: Notice of No Service: Notice of No Answer:

Attorneys

Number	Attorney Code	Type of Counsel	Name	Email	Phone
Attorney 1	ALL016		ALLENSTEIN MYRON KAY	MYRON@ALLENSTEIN.COM	(256) 546-6314

Party 2 - Defendant BUSINESS - METROPOLITAN LIFE INSURANCE COMPANY**Party Information**

Party: D001-Defendant Name: METROPOLITAN LIFE INSURANCE COMPANY Type: B-BUSINESS
 Index: C SUMNERS DAVI Alt Name: Hardship: No JID: DAK
 Address 1: 2 NORTH JACKSON STREET Phone: (256) 000-0000
 Address 2: SUITE 605
 City: MONTGOMERY State: AL Zip: 36104-0000 Country: US
 SSN: XXX-XX-X999 DOB: Sex: Race:

Court Action

Court Action: Court Action Date:
 Amount of Judgement: \$0.00 Court Action For: Exemptions:
 Cost Against Party: \$0.00 Other Cost: \$0.00 Date Satisfied:
 Comment: Arrest Date:
 Warrant Action Date: Warrant Action Status: Status Description:

Service Information

Issued: 03/08/2017 Issued Type: C-CERTIFIED MAIL Reissue: Reissue Type:
 Return: Return Type: Return: Return Type:
 Served: 03/13/2017 Service Type: C-CERTIFIED MAIL Service On: Served By:
 Answer: Answer Type: Notice of No Service: Notice of No Answer:

Attorneys

Number	Attorney Code	Type of Counsel	Name	Email	Phone
Attorney 1	000000		PRO SE		

Financial**Fee Sheet**

Fee Status	Admin Fee	Fee Code	Payor	Payee	Amount Due	Amount Paid	Balance	Amount Hold	Garnish Party
ACTIVE	N	AOCC	C001	000	\$6.77	\$6.77	\$0.00	\$0.00 0	
ACTIVE	N	CONV	C001	000	\$0.00	\$10.11	\$0.00	\$0.00 0	
ACTIVE	N	CV00	C001	000	\$201.00	\$201.00	\$0.00	\$0.00 0	
ACTIVE	N	VADM	C001	000	\$45.00	\$45.00	\$0.00	\$0.00 0	
Total:					\$252.77	\$262.88	-\$10.11	\$0.00	

Financial History

Transaction Date	Description	Disbursement Account	Transaction Batch	Receipt Number	Amount	From Party	To Party	Money Type	Admin Fee	Reason	Attorney	Operator
03/08/2017	CREDIT	CONV	2017109	1728020	\$10.11	C001	000		N			ERS
03/08/2017	RECEIPT	AOCC	2017109	1728010	\$6.77	C001	000		N			ERS
03/08/2017	RECEIPT	CV00	2017109	1728030	\$201.00	C001	000		N			ERS
03/08/2017	RECEIPT	VADM	2017109	1728040	\$45.00	C001	000		N			ERS

Case Action Summary

Date:	Time	Code	Comments	Operator
3/8/2017	3:40 PM	ECOMP	COMPLAINT E-FILED.	ALL016
3/8/2017	3:41 PM	FILE	FILED THIS DATE: 03/08/2017 (AV01)	AJA
3/8/2017	3:41 PM	ASSJ	ASSIGNED TO JUDGE: DAVID A KIMBERLEY (AV01)	AJA
3/8/2017	3:41 PM	SCAN	CASE SCANNED STATUS SET TO: N (AV01)	AJA
3/8/2017	3:41 PM	EORD	E-ORDER FLAG SET TO "Y" (AV01)	AJA
3/8/2017	3:41 PM	TDMN	BENCH/NON-JURY TRIAL REQUESTED (AV01)	AJA
3/8/2017	3:41 PM	ORIG	ORIGIN: INITIAL FILING (AV01)	AJA
3/8/2017	3:41 PM	EXPD	EXPEDITED STATUS DENIED (AV01)	AJA
3/8/2017	3:41 PM	STAT	CASE ASSIGNED STATUS OF: ACTIVE (AV01)	AJA
3/8/2017	3:41 PM	C001	C001 PARTY ADDED: SUMNERS DAVID (AV02)	AJA
3/8/2017	3:41 PM	C001	INDIGENT FLAG SET TO: N (AV02)	AJA
3/8/2017	3:41 PM	C001	LISTED AS ATTORNEY FOR C001: ALLENSTEIN MYRON KAY	AJA
3/8/2017	3:41 PM	C001	C001 E-ORDER FLAG SET TO "N" (AV02)	AJA
3/8/2017	3:41 PM	D001	D001 PARTY ADDED: METROPOLITAN LIFE INSURANCE COMP	AJA
3/8/2017	3:41 PM	D001	INDIGENT FLAG SET TO: N (AV02)	AJA
3/8/2017	3:41 PM	D001	LISTED AS ATTORNEY FOR D001: PRO SE (AV02)	AJA
3/8/2017	3:41 PM	D001	CERTIFIED MAI ISSUED: 03/08/2017 TO D001 (AV02)	AJA
3/8/2017	3:41 PM	D001	D001 E-ORDER FLAG SET TO "N" (AV02)	AJA
3/9/2017	9:14 AM	ESCAN	SCAN - FILED 3/9/2017 - CERTIFIED MAIL	ERS
3/10/2017	9:39 AM	C001	CASE ACTION SUMMARY PRINTED (AV02)	PAP
3/17/2017	12:26 PM	ESERC	SERVICE RETURN	PAM
3/17/2017	12:26 PM	D001	SERVICE OF CERTIFIED MAI ON 03/13/2017 FOR D001	PAP

**END OF THE REPORT**

DOCUMENT 1



ELECTRONICALLY FILED
3/8/2017 3:40 PM
31-CV-2017-900195.00
CIRCUIT COURT OF
ETOWAH COUNTY, ALABAMA
CASSANDRA JOHNSON, CLERK

State of Alabama
Unified Judicial System
Form ARCiv-93 Rev.5/99

COVER SHEET
CIRCUIT COURT - CIVIL CASE
(Not For Domestic Relations Cases)

Ca:

31

Date of Filing:
03/08/2017

Judge Code:

GENERAL INFORMATION

IN THE CIRCUIT COURT OF ETOWAH COUNTY, ALABAMA
DAVID SUMNERS v. METROPOLITAN LIFE INSURANCE COMPANY

First Plaintiff: ☐ Business ☒ Individual **First Defendant:** ☒ Business ☐ Individual
☐ Government ☐ Other ☐ Government ☐ Other

NATURE OF SUIT: Select primary cause of action, by checking box (check only one) that best characterizes your action:

TORTS: PERSONAL INJURY

- ☐ WDEA - Wrongful Death
☐ TONG - Negligence: General
☐ TOMV - Negligence: Motor Vehicle
☐ TOWA - Wantonness
☐ TOPL - Product Liability/AEMLD
☐ TOMM - Malpractice-Medical
☐ TOLM - Malpractice-Legal
☐ TOOM - Malpractice-Other
☐ TBFM - Fraud/Bad Faith/Misrepresentation
☐ TOXX - Other: _____

TORTS: PERSONAL INJURY

- ☐ TOPE - Personal Property
☐ TORE - Real Property

OTHER CIVIL FILINGS

- ☐ ABAN - Abandoned Automobile
☐ ACCT - Account & Nonmortgage
☐ APAA - Administrative Agency Appeal
☐ ADPA - Administrative Procedure Act
☐ ANPS - Adults in Need of Protective Service

OTHER CIVIL FILINGS (cont'd)

- ☐ MSXX - Birth/Death Certificate Modification/Bond Forfeiture Appeal/Enforcement of Agency Subpoena/Petition to Preserve
☐ CVRT - Civil Rights
☐ COND - Condemnation/Eminent Domain/Right-of-Way
☐ CTMP - Contempt of Court
☒ CONT - Contract/Ejectment/Writ of Seizure
☐ TOCN - Conversion
☐ EQND - Equity Non-Damages Actions/Declaratory Judgment/Injunction Election Contest/Quiet Title/Sale For Division
☐ CVUD - Eviction Appeal/Unlawful Detainer
☐ FORJ - Foreign Judgment
☐ FORF - Fruits of Crime Forfeiture
☐ MSHC - Habeas Corpus/Extraordinary Writ/Mandamus/Prohibition
☐ PFAB - Protection From Abuse
☐ FELA - Railroad/Seaman (FELA)
☐ RPRO - Real Property
☐ WTEG - Will/Trust/Estate/Guardianship/Conservatorship
☐ COMP - Workers' Compensation
☐ CVXX - Miscellaneous Circuit Civil Case

ORIGIN: F ☒ INITIAL FILINGA ☐ APPEAL FROM DISTRICT COURTO ☐ OTHERR ☐ REMANDEDT ☐ TRANSFERRED FROM OTHER CIRCUIT COURTHAS JURY TRIAL BEEN DEMANDED? ☐ YES ☒ NO

Note: Checking "Yes" does not constitute a demand for a jury trial. (See Rules 38 and 39, Ala.R.Civ.P. for procedure)

RELIEF REQUESTED:

☒ MONETARY AWARD REQUESTED ☐ NO MONETARY AWARD REQUESTED

ATTORNEY CODE:

ALL016

3/8/2017 3:40:11 PM

Date

/s/ MYRON KAY ALLENSTEIN

Signature of Attorney/Party filing this form

MEDIATION REQUESTED:

☐ YES ☒ NO ☐ UNDECIDED

DOCUMENT 2



ELECTRONICALLY FILED
3/8/2017 3:40 PM
31-CV-2017-900195.00
CIRCUIT COURT OF
ETOWAH COUNTY, ALABAMA
CASSANDRA JOHNSON, CLERK

IN THE CIRCUIT COURT OF ETOWAH COUNTY, ALABAMA

DAVID SUMNERS,

Plaintiff,

v.

METROPOLITAN LIFE INSURANCE CO.,

Defendant

*
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*
*
*
*
*
*

Case Number: _____

COMPLAINT

Count I – LTD Benefits

1. Plaintiff, age 56, has long term disability protection by an insurance contract with Metropolitan Life Insurance Company through his employment with Metropolitan Life Insurance Company which pays benefits if he becomes disabled.

2. Plaintiff is disabled and entitled to long term disability benefits from Metropolitan Life Insurance Company.

3. Plaintiff applied for long term disability benefits which were denied on March 11, 2016.

4. Defendant issued a final denial on February 2, 2017.

5. Plaintiff has exhausted all administrative remedies.

6. This claim is pursuant to 29 U.S.C. §1132.

WHEREFORE, Plaintiff prays for appropriate equitable relief including benefits, attorney fees and costs which are less than \$30,000.

A handwritten signature in black ink, appearing to read "Myron K. Allenstein", is written over a horizontal line.

MYRON K. ALLENSTEIN (ALL016)
ROSE MARIE ALLENSTEIN (ALL060)
ALLENSTEIN & ALLENSTEIN, LLC
Attorneys for Plaintiff
141 South 9th Street
Gadsden, AL 35901
(256) 546-6314
(256) 547-7648 (fax)
myron@allenstein.com
rose@allenstein.com



AlaFile E-Notice

31-CV-2017-900195.00

To: MYRON KAY ALLENSTEIN
myron@allenstein.com

NOTICE OF ELECTRONIC FILING

IN THE CIRCUIT COURT OF ETOWAH COUNTY, ALABAMA

DAVID SUMNERS V. METROPOLITAN LIFE INSURANCE COMPANY
31-CV-2017-900195.00

The following complaint was FILED on 3/8/2017 3:40:33 PM

Notice Date: 3/8/2017 3:40:33 PM

CASSANDRA JOHNSON
CIRCUIT COURT CLERK
ETOWAH COUNTY, ALABAMA
801 FORREST AVENUE
SUITE 202
GADSDEN, AL, 35901

256-549-2150



AlaFile E-Notice

31-CV-2017-900195.00

To: METROPOLITAN LIFE INSURANCE COMPANY
2 NORTH JACKSON STREET
SUITE 605
MONTGOMERY, AL, 36104

NOTICE OF ELECTRONIC FILING

IN THE CIRCUIT COURT OF ETOWAH COUNTY, ALABAMA

DAVID SUMNERS V. METROPOLITAN LIFE INSURANCE COMPANY
31-CV-2017-900195.00

The following complaint was FILED on 3/8/2017 3:40:33 PM

Notice Date: 3/8/2017 3:40:33 PM

CASSANDRA JOHNSON
CIRCUIT COURT CLERK
ETOWAH COUNTY, ALABAMA
801 FORREST AVENUE
SUITE 202
GADSDEN, AL, 35901

256-549-2150

State of Alabama Unified Judicial System Form C-34 Rev 6/88	SUMMONS - CIVIL -	Case Number: 31-CV-2017-900195.00
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IN THE CIRCUIT COURT OF ETOWAH COUNTY
 DAVID SUMNERS V. METROPOLITAN LIFE INSURANCE COMPANY

METROPOLITAN LIFE INSURANCE COMPANY, 2 NORTH JACKSON STREET SUITE 605, MONTGOMERY, AL 36104

NOTICE TO _____

THE COMPLAINT WHICH IS ATTACHED TO THIS SUMMONS IS IMPORTANT AND YOU MUST TAKE IMMEDIATE ACTION TO PROTECT YOUR RIGHTS. YOU OR YOUR ATTORNEY ARE REQUIRED TO FILE THE ORIGINAL OF YOUR WRITTEN ANSWER, EITHER ADMITTING OR DENYING EACH ALLEGATION IN THE COMPLAINT WITH THE CLERK OF THIS COURT. A COPY OF YOUR ANSWER MUST BE MAILED OR HAND DELIVERED BY YOU OR YOUR ATTORNEY TO THE OPPOSING PARTY'S ATTORNEY MYRON KAY ALLENSTEIN

WHOSE ADDRESS IS 141 S. 9TH STREET, GADSDEN, AL 35901

THE ANSWER MUST BE MAILED WITHIN 30 DAYS AFTER THIS SUMMONS AND COMPLAINT WERE DELIVERED TO YOU OR A JUDGMENT BY DEFAULT MAY BE ENTERED AGAINST YOU FOR THE MONEY OR OTHER THINGS DEMANDED IN THE COMPLAINT.

TO ANY SHERIFF OR ANY PERSONNEL AUTHORIZED by the Alabama Rules of the Civil Procedure:

☐ You are hereby commanded to serve this summons and a copy of the complaint in this action upon the defendant

☒ Service by certified mail of this summons is initiated upon the written request of DAVID SUMNERS

pursuant to the Alabama Rules of the Civil Procedure

Date 3/8/2017 3:40:33 PM /s/ CASSANDRA JOHNSON

Clerk/Register

801 FORREST AVENUE

SUITE 202

GADSDEN, AL 35901

☒ Certified Mail is hereby requested /s/ MYRON KAY ALLENSTEIN

Plaintiff's/Attorney's Signature

RETURN ON SERVICE:

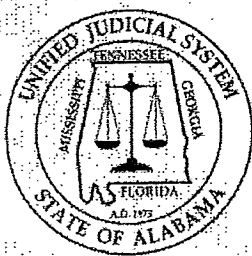
☐ Return receipt of certified mail received in this office on _____

☐ I certify that I personally delivered a copy of the Summons and Complaint to _____

_____ in _____ County, Alabama on _____ (Date)

Date	Server's Signature	Address of Server
Type of Server	Server's Printed Name	Phone Number of Server

DOCUMENT 5



NOTICE TO CLERK

REQUIREMENTS FOR COMPLETING SERVICE BY
CERTIFIED MAIL OR FIRST CLASS MAIL

IN THE CIRCUIT COURT OF ETOWAH COUNTY, ALABAMA
DAVID SUMNERS V. METROPOLITAN LIFE INSURANCE COMPANY

31-CV-2017-900195.00

To: CLERK ETOWAH
clerk.etowah@alacourt.gov

TOTAL POSTAGE PAID: \$6.77

Parties to be served by Certified Mail - Return Receipt Requested

METROPOLITAN LIFE INSURANCE COMPANY

2 NORTH JACKSON STREET

SUITE 605

MONTGOMERY, AL 36104

Postage: \$6.77

Parties to be served by Certified Mail - Restricted Delivery - Return Receipt Requested

Parties to be served by First Class Mail

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) For delivery information visit our website at www.usps.com	
OFFICIAL USE	
Postage \$	Postmark Here
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	
Sent To	
Street, Apt. No., or PO Box No.	
City, State, ZIP+4	
See Reverse for Instructions	



AlaFile E-Notice

31-CV-2017-900195.00

Judge: DAVID A KIMBERLEY

To: ALLENSTEIN MYRON KAY
myron@allenstein.com

NOTICE OF SERVICE

IN THE CIRCUIT COURT OF ETOWAH COUNTY, ALABAMA

DAVID SUMNERS V. METROPOLITAN LIFE INSURANCE COMPANY
31-CV-2017-900195.00

The following matter was served on 3/13/2017

D001 METROPOLITAN LIFE INSURANCE COMPANY

Corresponding To
CERTIFIED MAIL

CASSANDRA JOHNSON
CIRCUIT COURT CLERK
ETOWAH COUNTY, ALABAMA
801 FORREST AVENUE
SUITE 202
GADSDEN, AL, 35901

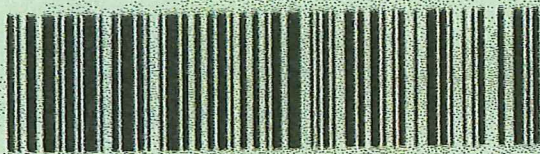
256-549-2150

DOCUMENT 6

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits

Metropolitan Life Insurance Company
2 North Jackson Street
Suite 605
Montgomery, AL 36104
CV-2017-900195 DAK S&C



9590 9402 2419 6249 2236 57

2 Article Number (Transfer from service label)

7013 1710 0000 7880 8355

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

3.13.19

Address different from item 1? ☐ Yes
 Delivery address below: ☐ No

MAR 17 2017

CASSANDRA "SAM" JOHNSON
 CIRCUIT COURT CLERK

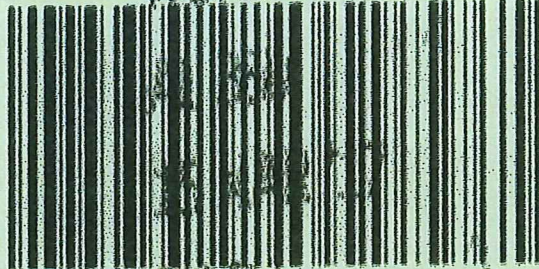
3. Service Type

- | | |
|--|---|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input checked="" type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail | |
| <input type="checkbox"/> Insured Mail Restricted Delivery | |

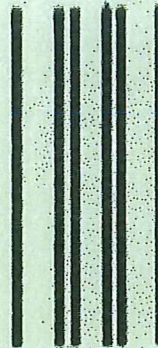
Domestic Return Receipt

DOCUMENT 6

USPS TRACKING#



9590 9402 2419 6249 2236 57



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

United States
Postal Service

• Sender: Please print your name, address, and ZIP+4® in this box•

CASSANDRA "SAM" JOHNSON
ETOWAH COUNTY CIRCUIT CLERK
801 FORREST AVE - SUITE 202
GADSDEN, ALABAMA 35901

